

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | J'ITIALS | ID NO. | DATE |
|---------------------------|----------|--------|-----------|
| FEE DETERMINATION | | | 1 |
| O.I.P.E. CLASSIFIER | | 49 | 2/57/01 |
| FORMALITY REVIEW | AK | 93/ | 03/28/01 |
| RESPONSE FORMALITY REVIEW | NN | 774 | 0.19.2.10 |
| | H.S | 943 | 10=12-1 |

INDEX OF CLAIMS

| ~ | Rejected | N | Non-elected |
|---|----------------------------|-----|--------------|
| | Allowed | - 1 | Interference |
| _ | (Through numeral) Canceled | Α | Appeal |
| ÷ | Restricted | 0 | Objected |

| ÷ Hestricted U Objected | | | | | | | | | |
|--|----------|--|-------|--|--|--|--|--|--|
| Claim Date | Claim | Date | Claim | Date | | | | | |
| Final Original | Final | | Final | | | | | | |
| 2 1 | 51 52 | | 101 | | | | | | |
| 3 1 1 | 53 | | 103 | | | | | | |
| 4 | 54 | | 104 | | | | | | |
| 5 | 55 | | 105 | | | | | | |
| 6 | 56 | | 106 | | | | | | |
| 7 | 57 | | 107 | | | | | | |
| 8 | 58 | | 108 | | | | | | |
| 9 10 | 59 | | 110 | | | | | | |
| 111 | 61 | | 111 | | | | | | |
| 12 | 62 | | 112 | | | | | | |
| 13 | 63 | | 113 | | | | | | |
| 3 | 64 | | 114 | | | | | | |
| 15 | 65 | | 115 | | | | | | |
| 16 | 66 | | 116 | | | | | | |
| 17 | 67 | | 117 | | | | | | |
| 18 | 68 | | 119 | | | | | | |
| ▕▗▃▗▎▃▗▎▄▋ ┤╌╌┼╸ [╲] ┤ ╶╴ ┤ ┈┤╨═╂╌ | 70 | | 120 | | | | | | |
| 20 | 1 71 | | 121 | | | | | | |
| 21 22 | 72 | | 122 | | | | | | |
| 23 | 73 | | 123 | | | | | | |
| 24 | 74 | | 124 | | | | | | |
| 8 | 75 | | 125 | | | | | | |
| 26 | 76 | | 126 | | | | | | |
| 27 | | | 127 | | | | | | |
| 28 | 78 | | 128 | | | | | | |
| 29 | 79 | | 130 | | | | | | |
| 30 31 | 81 | | 131 | | | | | | |
| 32 | 82 | | 132 | | | | | | |
| 33 | 83 | | 133 | | | | | | |
| 34 | 84 | | 134 | | | | | | |
| (5) | 85 | | 135 | | | | | | |
| 36 | 86 | | 136 | | | | | | |
| 37 | 87 | | 137 | | | | | | |
| 38 | 88 | | 138 | | | | | | |
| 39 40 | 89 | | 139 | ▎▐▗▋ ▄╅ ┈ ╏ | | | | | |
| 41 | 91 | ├─┼─┼─┼─┤ | 141 | | | | | | |
| 42 | 92 | ▎▕▗ ┤ ┤ ┤ | 142 | | | | | | |
| 43 | 93 | | 143 | | | | | | |
| 44 | 94 | | 144 | | | | | | |
| 45 | 95 | | 145 | | | | | | |
| 46 | 96 | | 146 | | | | | | |
| 47 | 97 | | 147 | | | | | | |
| 48 | 98 | | 148 | | | | | | |
| 49 | 99 | ┠╶┩┈ ┼┈┼┈┼┈┤ | 149 | | | | | | |
| 50 | | <u> </u> | | | | | | | |

If more than 150 claims or 10 actions staple additional sheet here